

Electronic Filing System (EFS) Data

Electronic Patent Application Submission

USPTO Use Only

EFS ID: 11901
Application ID: 09682073
Title of Invention: Method of Device-to-Device Communications in Hybrid Distributed Device Control Networks
First Named Inventor: Antonio Mugica
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-07-17 
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: 38146
Digital Certificate Holder: cn=Jeffrey Monroe Furr, ou=Registered Attorneys, ou=Patent and Trademark Office, ou=Department of Commerce, o=U.S. Government, c=US
Certificate Message Digest: cyLThLAvsV4poy9MT6Zv9Q==
Total Fees Authorized: \$355.0

Payment Category: CC – Credit Card
Credit Card Number: ****9699
Expiration Date: 09112002
Card Holder Name: Antonio Mugica
RAM User ID: EFSPROD
RAM Accounting Date: 2001-07-18
RAM Sequence Number: 314754
RAM Payment Status: RAM success
Postal Code: 33487

TRANSMITTAL FORM

JC930 U.S. pro
09/682073
07/17/01



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number: 38146

Method of Device-to-Device Communications in Hybrid Distributed Device Control Networks

First Named Inventor: Mr. Antonio Mugica

SUBMITTED BY

Name: Mr. Jeffrey Furr Esq.

Registration Number: 38146

Electronic Signature Mark: Jeffrey Furr Date Signed: 20010717

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration	Dis1.tif
declaration	Dis2.tif
declaration	Dis3.tif
fee-transmittal	D2DHybridfee.xml
bibd-transmittal	D2DHybridapds.xml

specification

D2Dspec.xml

Attached Image File(s):

Dis1.tif

Dis2.tif

Dis3.tif

Comments:

0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

Please type a plus sign (+) inside this box →

PTO/SB/01 (10)

Approved for use through 10/31/2002. OMB 0651-0

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	
First Named Inventor	ANTONIO MUGICA
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF DEVICE-TO-DEVICE COMMUNICATIONS IN HYBRID DISTRIBUTED CONTROL NETWORKS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable)

Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuations-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments or suggestions concerning the burden hour statement should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:

 Customer Number
or Bar Code Label

Correspondence address below

Name _____

Address _____

Address _____

City _____

State _____

ZIP _____

Country _____

Telephone _____

FAX _____

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are so true and know that these statements were made with the knowledge that such statements and the marks are registrable by the Patent and Trademark Office under 35 U.S.C. 101 and that such false statements may subject me to the penalties of perjury or any other criminal penalties.

NAME OF SOLE OR FIRST INVENTOR
 A petition has been filed for this unsigned inventor
Given Name **ANTONIO**
First and middle (if any)Family Name
or Surname **MUSICA**Inventor's
Signature Date **7/11/2001**Residence City **Boca Raton**State **FL**Country **U.S.A.**Citizenship **Venezuela**Mailing Address **19591 Piney Key Drive**

Mailing Address

City **Boca Raton**State **FL**ZIP **33498**Country **U.S.A.**
NAME OF SECOND INVENTOR
 A petition has been filed for this unsigned inventor
Given Name **PAUL**
First and middle (if any)Family Name
or Surname **SABIO**Inventor's
Signature Date **7/11/2001**Residence City **Caracas**

State

Country **Venezuela**Citizenship **Venezuela**Mailing Address **Ave Losara, Transcar 16**Mailing Address **Calle 21 de Mayo, 1000 Chacao**

**DECLARATION****ADDITIONAL INVENTOR(S)**
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:

 A petition has been filed for this additional inventor.

Given Name (first and middle if any):

Family Name or Surname:

LNU

VENEZAS

Inventor's Signature:

Jesús Edmundo

Date: 7/17/20

Residence City:

Caracas

State:

Country: Venezuela, Venezuela

Mailing Address:

Av La Salle la Colina de Alles Belo,

Mailing Address:

Qta. M.s negos

City: Maracaibo

State:

ZIP:

Country:

Venezuela

Name of Additional Joint Inventor, if any:

 A petition has been filed for this additional inventor.

Given Name (first and middle if any):

Family Name or Surname:

Inventor's Signature:

Date:

Residence City:

State:

Country:

Citizenship:

Mailing Address:

Mailing Address:

City:

State:

ZIP:

Country:

Name of Additional Joint Inventor, if any:

 A petition has been filed for this additional inventor.

Given Name (first and middle if any):

Family Name or Surname:

Inventor's Signature:

Date:

Residence City:

State:

Country:

Citizenhip:

Mailing Address:

Mailing Address:

City:

State:

ZIP:

Country:

FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Small Business Concern

TOTAL FEES AUTHORIZED: \$ 355

BANK (CREDIT) CARD INFORMATION:

Credit Card Number:	9699
Expiration Date:	20020911
Authorized Name:	Antonio Mugica
Billing Address:	33487

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 355

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 7	203	\$ 9	0	\$ 0
Independent Claims: 1	202	\$ 40	0	\$ 0

Subtotal For Extra Claims Fees: \$ 0